CITY OF BOSTON NOTICE OF CLAIM

Important Notice: There is a Thirty Day statute of limitations (M.G.L., ch 84) from the date of the defected sidewalks/roads incidents and a Three Year statute of limitation (M.G.L., ch 258) from the date of the motor vehicle accident to file a claim of notice related to these incidents. Claims must be filed in the Office of the City Clerk, Prior to the statute of limitation dates. Your claim will be rejected if it arrives after the statute of limitation dates.

(Please Print All Information)

Type of Claim: **Vehicle Incident:** [   ]   **Road/Sidewalk Defect:** [   ]

Claimant(s) Name   [   ] ,   [   ]   [   ]
                       (last)   (first)   (initial)
                       [   ] ,   [   ]   [   ]
                       (last)   (first)   (initial)

Street Address: [   ]

City/State/Zip Code: [   ]   [   ]   [   ]

Telephone Number: [   ] (day)   [   ] (evening)

Attorney / Insurance Company   [   ]
                                   [   ]
                                    (street address)
City/State/Zip Code: [   ]   [   ]   [   ]

Date & Time of Incident: [   ]   [   ] a.m. / p.m. (circle one)

Exact Location of Incident: [   ]
(street, avenue or blvd/number or name of closest intersecting street)

Describe in Detail Nature of incident or injuries:
(Use supplementary sheet if necessary)

[   ]

City department affiliated w/claim
(unsure leave blank)

Witness Information (if any)

             (last)   (first)

Street Address:

City/State/Zip Code:

Name of Vehicle Driver:

             (last)   (first)

Drivers License #   **Vehicle Plate #**

Vehicle Make:

Police Incident Report:

            (yes)   (no)

Repair receipt or itemized estimate:
(if the itemized estimate/repair receipt
is greater than $500.00 a second opinion
may be required).

            (yes)   (no)

Signature of Claimant(s)   Date:

                                                         Date:

Submit all documentation to: **Office of the City Clerk**
                                    601 City Hall
                                    Boston, MA. 02201
                                    Attn: Claims Division

Please Note:
A $5.00 Filing Fee per Chapter 13 of the Ordinances of 1981. Said Fee to be made
part of the compensation if a decision is rendered on your behalf. Your claim
will not be processed if it is not accompanied with the filing fee.

Compensation is paid only if the City of Boston is found liable. To preserve your
rights, if the City does not pay your claim, you can file suit in an appropriate court
within three years from the date of the incident.